

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Malkin et al. DOCKET: YOR920010331US1 (8728-517)

SERIAL NO.: 09/904,088 GROUP ART UNIT: 3629

FILED: July 12, 2001 EXAMINER: Borissov, Igor N.

FOR: **METHOD FOR INDICATING CONSUMER DEMAND**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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MAY 17 2004

GROUP 3600

AMENDMENT UNDER 37 C.F.R. 1.111

Examiner:

In response to the Office Action mailed February 9, 2004, please consider the following amendments and remarks:

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to the: Assistant Commissioner for Patents, Washington, D.C. 20231 on 5/10/2004.

Dated: May 10, 2004


Michele Fleitman

05/13/2004 DENMANU1 00000025 500510 09904088

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Attorney Docket No.: YOR920010331US1 (8728-517)

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AMENDMENT TRANSMITTAL FORM

GROUP 3600

Sir:

Transmitted herewith is an amendment in the above-identified application.

- Small entity status of this application under 37 C.F.R. §§1.9 and 1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity under 37 C.F.R. §§1.9 and 1.27 is enclosed.
- No additional fee is required.

For	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate (Small Entity)	Addit. Fee	Rate	Addit. Fee
TOTAL CLAIMS*	26	20	6	x 9 =	\$0	x 18 =	\$108
INDEPENDENT CLAIMS	3	3	0	x 43 =	\$0	x 86 =	\$0
<input type="checkbox"/> First Presentation of Multiple Dep. Claim				140		290	\$0

* If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

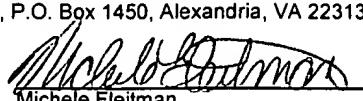
*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

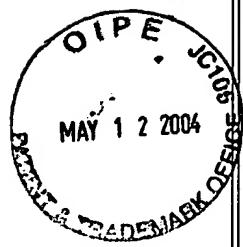
The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

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Dated: May 10, 2004


Michele Fleitman



Please charge Deposit Account No. 50-0510/IBM (Yorktown Heights) in the amount of \$ 108.00. Two (2) copies of this sheet are enclosed.

A check in the amount of \$ _____ is enclosed.

Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. §§1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 50-0510/IBM (Yorktown Heights). Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 50-0510/IBM (Yorktown Heights) therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,

F. CHAU & ASSOCIATES, LLP
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(516) 357-0091


Nathaniel T. Wallace
Reg No. 48,909
Attorney for Applicant(s)